

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	JB		09-25-01
O.I.P.E. CLASSIFIER		19	10-01-01
FORMALITY REVIEW	TL	1141	10/16/01
RESPONSE FORMALITY REVIEW	ST	1021	01/04/01

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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70-10-01-02-03-04  
10/01/01

100-01-02-03-04  
10/01/01